		DEPARTMENT (ATE OF UTAH OF NATURAL RE F OIL, GAS AND				FOR AMENDED REPOR		
APPLICATION FOR PERMIT TO DRILL						1. WELL NAME and NUMBER Federal 12-15-9-16			
2. TYPE OF WORK DRILL NEW WELL (REENTER P&A WELL) DEEPEN WELL)						3. FIELD OR WILDCAT MONUMENT BUTTE			
4. TYPE OF WELL Oil Well Coalbed Methane Well: NO						5. UNIT or COMMUNITIZATION AGREEMENT NAME GMBU (GRRV)			
6. NAME OF OPERATOR NEWFIELD PRODUCTION COMPANY						7. OPERATOR PHONE 435 646-4825			
8. ADDRESS OF OPERATOR Rt 3 Box 3630 , Myton, UT, 84052						9. OPERATOR E-MAIL mcrozier@newfield.com			
10. MINERAL LEASE NUMBER (FEDERAL, INDIAN, OR STATE) UTU-79834	11. MINERAL OWNER	. MINERAL OWNERSHIP				12. SURFACE OWNERSHIP FEDERAL I INDIAN STATE FEE			
13. NAME OF SURFACE OWNER (if box 12 = 'fee')						14. SURFACE OWNER PHONE (if box 12 = 'fee')			
15. ADDRESS OF SURFACE OWNER (if box 12 = 'fee')						16. SURFACE OWNER E-MAIL (if box 12 = 'fee')			
17. INDIAN ALLOTTEE OR TRIBE NAME (if box 12 = 'INDIAN')		18. INTEND TO COMMINGLE PRODUCTION FROM MULTIPLE FORMATIONS YES (Submit Commingling Application) NO				19. SLANT VERTICAL DIRECTIONAL HORIZONTAL			
20. LOCATION OF WELL	FOO	TAGES	QTR-QTR	SECTI	ION	TOWNSHIP	RANGE	MERIDIAN	
LOCATION AT SURFACE 1671 FS		L 409 FWL	VL NWSW			9.0 S	16.0 E	S	
Top of Uppermost Producing Zone 1671 FS		L 409 FWL	NWSW	15		9.0 S	16.0 E	S	
At Total Depth	1671 FS	L 409 FWL	NWSW	15		9.0 S	16.0 E	S	
21. COUNTY DUCHESNE 22. DISTANCE T			AREST LEASE LII 409	AREST LEASE LINE (Feet) 23. NUMBER OF ACRES IN DRILLING UNIT 409					
		DISTANCE TO NEAREST WELL IN SAME POOL oplied For Drilling or Completed) 1014			26. PROPOSED DEPTH MD: 5995 TVD: 5995				
27. ELEVATION - GROUND LEVEL		28. BOND NUMBER				29. SOURCE OF DRILLING WATER / WATER RIGHTS APPROVAL NUMBER IF APPLICABLE			
5825		WYB000493				437478			
		AT	TACHMENTS						
VERIFY THE FOLLOWING	ARE ATTACHE	D IN ACCORDANC	CE WITH THE U	TAH OIL	AND G	GAS CONSERVAT	ION GENERAL RU	JLES	
WELL PLAT OR MAP PREPARED BY LICENSED SURVEYOR OR ENGINEER				COMPLETE DRILLING PLAN					
AFFIDAVIT OF STATUS OF SURFACE OWNER AGREEMENT (IF FEE SURFACE)				FORM 5. IF OPERATOR IS OTHER THAN THE LEASE OWNER					
DIRECTIONAL SURVEY PLAN (IF DIRECTIONALLY OR HORIZONTALLY DRILLED)				TOPOGRAPHICAL MAP					
NAME Mandie Crozier		TITLE Regulatory Tech			PHO	PHONE 435 646-4825			
SIGNATURE DAT		DATE 08/30/2010	DATE 08/30/2010 EMA			AIL mcrozier@newfield.com			
API NUMBER ASSIGNED APPROVAL 43013504290000				Bacquill					
		Permit Manager							

